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#### MEDICAL SERVICES IN YUGOSLAVIA

Leo Moro

On a trip to Austria and Italy in the autumn of 1952, the writer had an opportunity to tour Yugoslav hospitals and factories for 2 weeks. He was permitted to talk with all classes of people and to visit any institution he wished, without any surveillance whatever.

Although socialized medical service prevails in Yugoslavia, private practice of medicine is permitted and private practitioners can be found both in the cities and in rural areas. Compulsory social insurance provides free medical services only to factory workers, officials, and collectivized peasants. Private enterprisers and peasants not belonging to collectives must pay for their own medical services. Since 69 percent of the population of the country is agrarian, the social insurance coverage is quite limited and, in the case of accident insurance, covers only about two million of the 16 million population of the country.

#### Medical Training

Yugoslavia has five medical schools. The two largest are located in Belgrade and Zagreb. Smaller ones are located in Ljubljana, Sarajevo, and Skoplje. They have a total enrollment of slightly less than 4,000 medical students. After World War II there were approximately 4,000 physicians in the country, and presently there are about 6,000, which is a ratio of one physician to approximately 3,000 population (in Finland the ratio is 1:2,000).

Before a student is admitted to medical school, he must have completed a preliminary training which corresponds to that required in Finland for admission to the university. Outstanding students may, however, be admitted upon completion of a 3-year premedical, secondary school whose curriculum includes physics, chemistry, biology, anatomy, sociology, social politics, and physiology. The

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medical training requires 6 years, with 2 additional years devoted to practical experience in hospitals. The curriculum corresponds generally to that of Finnish medical training. In the near future, greater emphasis will be given to social medicine and preventive medicine beginning in the first year of training.

The qualifying examination is given at a university, after which the physician may enter government service. While in training, medical students receive a government stipend of 3,000 dinars a month, which suffices for a bare existence. As in Finland, specialization requires an average of 3 years.

Approximately 80 percent of medical textbooks are published domestically. The writing of medical textbooks is a fairly remunerative pursuit, since these writers receive from 200,000 to 300,000 dinars, tax-free. By comparison, a communal physician may at best receive this amount for an entire year of service. Yugoslavia has 14 medical journals, some of which are quite eminent.

#### Administration of Medical Service

The Ministry of Health of the federal government directs the medical services of the country. Each republic has its own ministry of health. The republics are divided into six to eight districts, which in turn are divided into urban and rural medical communes, each with its own physicians and health centers.

A physician may be ordered to serve in any part of the country, unless he is a specialist. Hospital physicians have a 6-hour day, and roentgenologists have a 5-hour day. Compensation is on the basis of a fixed monthly salary, which is surprisingly low. Communal and town physicians, whose practices approximate those of Finnish physicians, receive only 10,000 to 12,000 dinars a month. The cost of living is fairly low, however. An apartment with three or four rooms can be rented at 400 to 700 dinars a month; and bread costs 32 dinars a kilogram, meat 150 to 200 dinars, and milk 30 dinars a liter. Clothing is especially expensive: a man's suit costs 15,000 to 50,000 dinars, and shoes 4,000 to 6,000 dinars. The salary is tax-free and 25 percent of it is in the form of coupons which entitle the holder to purchase industrial products at a reduction of 80 percent. Professors' salaries, which are among the highest, are about 22,000 dinars a month. Nurses receive 8,000 to 12,000 dinars a month, or nearly as much as physicians. The physician husband of a couple the writer met received 12,000 dinars a month, and the wife, an X-ray technician, received 13,500 dinars a month, of which 3,000 dinars were compensation for hazardous work.

In comparison, a housemaid received 5,000 to 6,000 dinars a month, while skilled tradesmen receives salaries approximately equal to those of physicians and frequently greater. However, patients have begun to make calls upon private physicians, thinking thus to obtain better medical service. General practitioners charge 100 to 150 dinars for such calls, while specialists charge 300 to 400 dinars. This type of income, however, is frequently heavily taxed. A young physician begins at a salary varying between 6,000 and 7,000 dinars a month and receives an increase at the completion of each 3 years of service. The maximum salary is 18,000 dinars a month.

All wage earners, including physicians, receive a family allowance of 3,000 dinars a month for each child. Physicians engaging in private practice are not eligible for family benefits. Hospital physicians may also receive 2,000 to 3,000 dinars additional salary a month for refraining from private practice. Hygienists receive special consideration of 6,000 dinars' additional pay a month. Physicians are permitted to accept part-time employment, generally compensated for on an hourly basis. Thus, a physician may receive 150 dinars an hour when working for an insurance institution.

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Hospitals and Pharmacies

A hospital and pharmacy located in Dubrovnik are among the oldest in Europe, dating back to the 14th century. This town also has a central hospital which serves the 20,000 inhabitants of the town and the approximately 130,000 population of the surrounding area. This hospital greatly resembled the Surgical Hospital of the University of Helsinki. The Dubrovnik hospital has 350 beds, and is divided into eight departments consisting of the surgical, tubercular, internal, otological, gynecological and obstetric, ophthalmological, children's department, and contagious diseases department. The staff consisted of 12 physicians and 6 assistants.

The customary working day of a hospital physician was 6 hours, but specialists worked only 2 hours a day. The salaries of the hospital physicians varied from 7,500 to 18,000 dinars a month. During a portion of the day the specialists worked in the polyclinic located in the health center. This is a type of a central polyclinic which also contains hospitalization insurance offices, and offices for the general interns, surgeons, gynecologists, venereologists, dermatologists, and otologists-ophthalmologists. The polyclinic for children's diseases was in a separate building. The building also contained complete facilities for treating tubercular patients, as well as reception rooms for dentists and workshops for dental technicians. The facilities included an X-ray department and a diversified laboratory in which clinical, sero-bacteriological, and hygienic examinations are made.

The workday of a general physician was 6 hours, of which 4 hours were spent in the polyclinic and 2 hours on outpatient visits. The number of patients appeared to vary greatly from day to day. On a relatively quiet day, there would be 20 to 30 patients to each physician, while on a busy day there would be as many as 100 to 120 per physician. The roentgenologists worked 5 hours a day, the laboratory assistants 7 hours, and the other female assistants 8 hours a day.

A central hospital with nearly 2,000 beds is located in Sarajevo. This hospital also serves as a university hospital. In addition, it has a 100-bed tubercular sanitarium, housed in a former school building. The equipment and food are good. A modest occupational-disease polyclinic and a work-hygiene laboratory are associated with the hospitals. The work-hygiene laboratory is to be integrated into a national health-research institute, which is now under construction.

The most important work-hygiene establishment of the country, located in Zagreb, employs approximately 60 physicians, engineers, chemists, physiologists, and psychologists. Although completed in 1948, the establishment has already produced a notable improvement in the industrial health conditions of the country.

Under Communism Yugoslavia has chosen the path of socialized medicine, although it thus far covers only a portion of the population. The economic position of the physicians under this system is not good, compared with that of the physicians in Finland, but numerous Yugoslav physicians consider it moderate. And, while the incidence of disease is high, owing to the low standard of living and to rapid industrialization, active measures have been taken for the prevention and control of disease.

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